

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JRW	75331	
O.I.P.E. CLASSIFIER		16	
FORMALITY REVIEW	BTI	60275	3900
RESPONSE FORMALITY REVIEW			4-11-00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1 1	✓ =
2 2	✓ =
3 3	✓ =
4 4	—
5 5	✓ =
6 6	○ =
7 7	✓ =
8 8	✓ =
9 9	○ =
10 10	○ =
11 11	○ =
12 12	○ =
13 13	✓ =
14 14	—
15 15	—
16 16	—
17 17	—
18 18	—
19 19	—
20 20	✓ =
21 21	—
22 22	—
23 23	—
24 24	—
25 25	✓ =
26 26	○ =
27 27	✓ =
28 28	—
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50 50	—

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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